

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						BERIAL NO. <i>10/608,170</i>	FILING DATE				
						APPLICANT(S)					
						CLAIMS					
JURISDICTION		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		IND	DEP	IND	DEP	IND	DEP
IND	DEP	IND	DEP	IND	DEP						
1						51					
2						52					
3						53					
4						54					
5						55					
6						56					
7						57					
8						58					
9						59					
10						60					
11						61					
12						62					
13						63					
14						64					
15						65					
16						66					
17						67					
18		/		/		68					
19	/			/		69					
20	/			/		70					
21	/			/		71					
22	/			/		72					
23	/			/		73					
24	/			/		74					
25	/			/		75					
26	/			/		76					
27	/			/		77					
28	/		/	/		78					
29	/		/	/		79					
30	/		/	/		80					
31	/		/	/		81					
32	/		/	/		82					
33	/		/	/		83					
34	/		/	/		84					
35	/		/	/		85					
36	/		/	/		86					
37	/		/	/		87					
38	/		/	/		88					
39	/		/	/		89					
40	/		/	/		90					
41	/		/	/		91					
42	/		/	/		92					
43						93					
44						94					
45						95					
46						96					
47						97					
48						98					
49						99					
50						100					
TOTAL IND.	2					TOTAL IND.					
TOTAL DEP.	23					TOTAL DEP.					
TOTAL CLAIMS	25	25				TOTAL CLAIMS					